



2017 -YOUTH PROGRAMS FUND
10% CLUB ELIGIBILITY APPLICATION



Date		
Organization Name		
Contact Person Name	Street Address/Zip Code	Daytime Phone
E-Mail Address		

Fiscal Agent (if applicable)		
Contact Person (Fiscal Agent)	Street Address/Zip Code	Daytime Phone
E-mail Address (Fiscal Agent)		

Organizational Mission: (Briefly describe)

Organizational Plan for Use of Funds

City Council Ward Served	Number of youth participants
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Non Profit Status: (Check non profit status held by your organization. **PLEASE ATTACH PROOF**)

Does your organization have: Non Profit Corporation status under Chapter 317, State of Minnesota?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your organization have IRS 501 Status:	Yes <input type="checkbox"/> No <input type="checkbox"/> Applied For <input type="checkbox"/>

NOTE: Each applicant **MUST** attach the following information. Please check-off each item to be sure it is included.

- ☐ Proof of Non Profit status
- ☐ Organizational By-Laws AND Articles of Incorporation
- ☐ CURRENT list of Officers or Directors. Include name/address/zip/day phone
- ☐ Affidavits - Signed by each CURRENT Officer/Director, and notarized
- ☐ Evidence that insurance can be, or has been obtained by the organization - if needed

RETURN COMPLETED APPLICATION TO:
Saint Paul Parks & Recreation, ATTN: Eric Thompson
1100 N. Hamline Ave., St. Paul, MN 55108
E-Mail: eric.thompson@ci.stpaul.mn.us

For further information call Eric Thompson at 651-755-5661
Or visit the City web page at www.ci.stpaul.mn.us

Revised 10/16